FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPRO	JVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person * SHERWIN STEPHEN A			2. Issuer Name and Ticker or Trading Symbol RIGEL PHARMACEUTICALS INC [RIGL]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner					
(Last) (First) (Middle) C/O RIGEL PHARMACEUTICALS, INC., 1180 VETERANS BLVD.				3. Date of Earliest Transaction (Month/Day/Year) 05/11/2016					Officer (give	e title below)	Oth	er (specify below)	
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)				_X_ I	6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
SOUTH SAN FRANCISCO, CA 94080 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu					s Acquired,	ured, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)	Title of Security 2. Transaction Date (Month/Day/Year		2A. Deemed 3. Trans Execution Date, if Code		8) (1	. Securities Acq A) or Disposed of Instr. 3, 4 and 5)	5. Amount of Owned Follow Transaction(s) (Instr. 3 and 4		f Securities Beneficially owing Reported s)		6. 7 Ownership of Form: B Direct (D)	. Nature f Indirect geneficial ownership (nstr. 4)		
			Table II				display	form are not reast of a currently of the course of the cou	valid OMB	control n		. TOTHI		
1. Title of Derivative Security		e of ivative	Date Execution Date, if	Code Securities		rivative	Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficia Ownershi (Instr. 4)
(Instr. 3)	Derivative Security				or Disortion of (D) (Instr	posed 3, 4,			Securities	Ü	Security	Securities Beneficially Owned Following Reported	Derivative Security: Direct (D) or Indirect	of Indire Beneficia Ownersh (Instr. 4)
(Instr. 3)	Derivative				or Disortion of (D) (Instr	3, 4,	Date Exercisable	y/Year) Expiration	Securities	Ü	Security	Securities Beneficially Owned Following Reported	Form of Derivative Security: Direct (D) or Indirect	of Indire Benefici Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SHERWIN STEPHEN A C/O RIGEL PHARMACEUTICALS, INC. 1180 VETERANS BLVD. SOUTH SAN FRANCISCO, CA 94080	X					

Signatures

/s/ Dolly Vance (Attorney-In-Fact)	05/11/2016
Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The shares vest monthly over twelve (12) months from the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.